

CLAIMS ONLY						Application Number <b>10/712410</b>	Filing Date			
						Applicant(s)				
<i>05-03-85</i>										
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend		
1							51			
2							52			
3							53			
4							54			
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43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep			<b>2</b>				Total Indep			
Total Depend			<b>10</b>				Total Depend			
Total Claims			<b>12</b>				Total Claims			